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**FEC** FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

PAGE 1 / 105 RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

13 APR 15 PM 3:53

Tor Air Addionzed Committee				Off	Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example over the	e: If typing, type			
Friends of Sherrod B	rown					
<u></u>						
					<u> </u>	
ADDRESS (number and street)	PO Box 15293			<u>-                                    </u>		
Check if different		<u> </u>	<u> </u>			
Check if different than previously reported. (ACC)	Washington DC 20003					
2. FEC IDENTIFICATION N	NUMBER ▼	CITY A		STATE A	ZIP CODE	
C C00264697	- 1	IC TUIC M	NEW		STATE ▼ DISTRICT	
		IS THIS REPORT	(N) OR	AMENDED (A)	OH 00	
4. TYPE OF REPORT (C	hoose One)	· · · · · · · · · · · · · · · · · · ·		<del></del>	<u></u>	
(a) Quarterly Reports:	(b)	12-Day PRE-Electi	on Report for the	<b>e</b> :		
April 15 Quarterly	Popert (O1)	Prim	ary (12P)	General (12G)	Runoff (12R)	
163.		Conv	vention (12C)	Special (12S)		
July 15 Quarterly	Report (Q2)	, 				
October 15 Quarte	erly Report (Q3)	Election on	M M / D D	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	in the State of	
January 31 Year-E	ind Report (YE) (c)	tion Report for t	he <sup>.</sup>			
		កា	eral (30G)			
		C. Gene	rai (30G)	Runoff (30R)	Special (30S)	
Termination Report	1	Election on	/ D D	\ \\	in the State of	
5. Covering Period 0	ـ اا اا ممالا! م	013 th	rough 0	M / D D / Y 31	2013	
I certify that I have examined th	nis Report and to the be	est of my knowledg	ge and belief it is	s true, correct and con	nplete.	
Type or Print Name of Treasurer						
Signature of Treasurer Judi	inamon udal	Num	re	Date 04	15 / 2013	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.						
Office Use					-	
Only					EC FORM 3 Revised 02/2003)	